

UNITED STATES DISTRICT COURT

WESTERN DISTRICT OF TEXAS, DEL RIO DIVISION

United States of America

vs.

(1) Kevin Cordova-Mendez

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§
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§

CRIMINAL COMPLAINT

CASE NUMBER: DR:12-M -05418(1)

I, the undersigned complainant being duly sworn state the following is true and correct to the best of my knowledge and belief. On or about **April 26, 2012** in **Maverick** county, in the **WESTERN DISTRICT OF TEXAS** defendant(s) did, (track statutory language of offense) knowingly and willfully enter the United States at a time and place other than as designated by Immigration Officers, he/she being an alien in the United States in violation of Title **8** United States Code, Section(s) **1325(a)(1)**.

I further state that I am a(n) **Border Patrol Agent** and that this complaint is based on the following facts: *"On April 26, 2012, the defendant, Kevin CORDOVA-Mendez, a native and citizen of Guatemala, was arrested near Eagle Pass, Texas. Subsequent investigation revealed that the defendant is an alien illegally present in the United States. The Defendant last entered the United States illegally from the Republic of Mexico by crossing the Rio Grande River at a time and place other than as designated by Immigration Officers, near Eagle Pass, Texas."*

Continued on the attached sheet and made a part of hereof:

☐ Yes ☒ No

Sworn to before me and subscribed in my presence,

04/27/2012

File Date

COLLIS WHITE

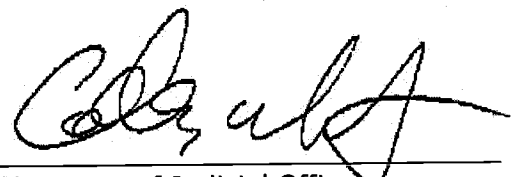
U.S. MAGISTRATE JUDGE



Signature of Complainant

at DEL RIO, Texas

City and State



Signature of Judicial Officer

1. CIR./DIST./DIV. CODE TXW		2. PERSON REPRESENTED (1) Kevin Cordova-Mendez		VOUCHER NUMBER	
3. MAG. DKT./DEF. NUMBER DR:12-M -05418(1)		4. DIST.DKT./DEF.NUMBER		5. APPEALS DKT./DEF.NUMBER	
7. IN CASE/MATTER OF (Case Name) U.S. vs. (1) Kevin Cordova-Mendez		8. PAYMENT CATEGORY Petty Offense		9. TYPE PERSON REPRESENTED Adult Defendant	
				10. REPRESENTATION TYPE Criminal Case	
11. OFFENSE(S) CHARGED (Cite U.S. Code, Title & Section) <i>If more than one offense, list (up to five) major offenses charged, according to severity of offense.</i> 8 USC 1325(a)(1) - IMPROPER ENTRY BY AN ALIEN 8 USC 1325(a)(1)					
12. ATTORNEY'S NAME (First Name, M.I., Last Name, including any suffix), AND MAILING ADDRESS Wade, Reginald Van 123 Meandering Way Del Rio, TX 78840 Telephone Number: (830) 768-2509			13. COURT ORDER <input checked="" type="checkbox"/> O Appointing Counsel <input type="checkbox"/> C Co-Counsel <input type="checkbox"/> F Subs for Federal Defender <input type="checkbox"/> R Subs for Retained Attorney <input type="checkbox"/> P Subs for Panel Attorney <input type="checkbox"/> Y Standby Counsel Prior Attorney's Name: _____ Appointment Date: _____ <input type="checkbox"/> Because the above-named person represented has testified under oath or has otherwise satisfied this court that he or she (1) is financially unable to employ counsel and (2) does not wish to waive counsel, and because the interests of justice so require, the attorney whose name appears in item 12 is appointed to represent this person in this case, OR <input type="checkbox"/> Other (See Instructions) _____ Signature of Presiding Judicial Officer or By Order of the Court 04/27/2012 Date of Order Nunc Pro Tunc Date Repayment or partial repayment ordered from the person represented for this service at time of appointment <input type="checkbox"/> YES <input type="checkbox"/> NO		
14. NAME AND MAILING ADDRESS OF LAW FIRM (Only provide per instructions)					

CLAIM FOR SERVICES AND EXPENSES			FOR COURT USE ONLY			
CATEGORIES (Attach itemization of services with dates)		HOURS CLAIMED	TOTAL AMOUNT CLAIMED	MATH/TECH ADJUSTED HOURS	MATH/TECH ADJUSTED AMOUNT	ADDITIONAL REVIEW
In Court	15. a. Arraignment and/or Plea					
	b. Bail and Detention Hearings					
	c. Motion Hearings					
	d. Trial					
	e. Sentencing Hearings					
	f. Revocation Hearings					
	g. Appeals Court					
	h. Other (Specify on additional sheets)					
(RATE PER HOUR = \$) TOTALS:						
Out of Court	16. a. Interviews and Conferences					
	b. Obtaining					
	c. Legal research and brief writing					
	d. Travel time					
	e. Investigative and other work (Specify on additional sheets)					
(RATE PER HOUR = \$) TOTALS:						
7.	Travel Expenses (lodging, parking, meals, mileage, etc.)					
18.	Other Expenses (other than expert, transcripts, etc.)					
GRAND TOTALS (CLAIMED AND ADJUSTED):						

19. CERTIFICATION OF ATTORNEY/PAYEE FOR THE PERIOD OF SERVICE FROM: _____ TO: _____		20. APPOINTMENT TERMINATION DATE IF OTHER THAN CASE COMPLETION		21. CASE DISPOSITION	
22. CLAIM STATUS <input type="checkbox"/> Final Payment <input type="checkbox"/> Interim Payment Number <input type="checkbox"/> Supplemental Payment Have you previously applied to the court for compensation and/or reimbursement for this case? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, were you paid? <input type="checkbox"/> YES <input type="checkbox"/> NO Other than from the Court, have you, or to your knowledge has anyone else, received payment (compensation or anything of value) from any other source in connection with this representation? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give details on additional sheets. I swear or affirm the truth or correctness of the above statements. Signature of Attorney _____ Date _____					

APPROVED FOR PAYMENT - COURT USE ONLY					
23. IN COURT COMP.		24. OUT OF COURT COMP		25. TRAVEL EXPENSES	
				26. OTHER EXPENSES	
28. SIGNATURE OF THE PRESIDING JUDGE		DATE		28a. JUDGE CODE	
29. IN COURT COMP.		30. OUT OF COURT COMP		31. TRAVEL EXPENSES	
				32. OTHER EXPENSES	
34. SIGNATURE OF THE CHIEF JUDGE, COURT OF APPEALS (OR DELEGATE) <i>Payment approved in excess of the statutory threshold amount.</i>		DATE		34a. JUDGE CODE	
				33. TOTAL AMT. APPR./CERT.	